Medical Sciences at Shillong has started functioning;

(b) if not, by when it will start functioning; and

(c) whether Government are proposing to create a central pool of seats for Post Graduate Medical Education for the North Eastern States?

THE MINISTER OF STATE OF THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRI SALEEM IQBAL SHERVANI): (a) and (b) Civic works have been undertaken for providing 30 bedded hospital facilities for starting services in the Cardiology and Gastroenterology etc.

(c) There is no such proposal at present.

Infant Mortality in Orissa

1494. SHRIMATI JAYANTI PATNAIK: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) what is the trend of infant mortality rate in Orissa compared to all India average; and

(b) what special steps are being taken to reduce infant mortality in Orissa?

THE MINISTER OF STATE OF THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRI SALEEM EQBAL SHERVANI): (a) The infant mortality rate is showing a declining trend. The estimated infant mortality rate for Orissa is higher than that for India. The estimates of infant mortality rate for India and Orissa for the last 10 years are given in the statement *(see* below).

(b) The Child Survival and Safe Motherhood Programme is being implemented in all the districts of Orissa. Under the Programme immunisation, prophylaxis against vitamin-A deficiency, appropriate management of diarrhoeal diseases nad acute respiratory infections and essential newborn care are being provided to reduce infant mortality.

Statement

Annual Estimates of Infant Mortality Rate India and Orissa, 1985—1994

Year	India**	Orissa
1985	97	132
1986	96	123
1987	95	126
1988	94	122
1989	91	121
1990	80	122
1991	80*	124
1992	79*	115
1993	74*	110
1994	.74*	103

** — Exclude Mizoram.
* — Excludes Jammu & Kashmir and Mozoram. Source : Sample Registration System.

Reconstitution of the Expert Committee on Tobacco

1495. SHRI V. RAJAN CHELLAPPA:
SHRI GUNDAPPA KORWAR:
SHRI HANUMANTHA RAO:
MAULANA OBAIDULLAH KHAN AZMI:

Will the Minister of HEALTH AND. FAMILY WELFARE be pleased to state:

(a) whether it is a fact that Government had considered the possibility of changing the composition of the present Expert Committee on Tobacco;

(b) if so, the details thereof;

(c) the composition of the present Expert Committee on Tobacco;

(d) whether the Expert Committee on Tobacco consists mainly of doctors and others involved in anti-tobacco writings and pronouncements;

(e) if so, whether there was a demand from the trade unions and farmers' union for their representation into the Expert Committee. if so, details thereof; and